

Yet American people do not have access to that care, the care that they have paid for through their tax dollars for the research. And yet we beg now and plead with the HMOs and the managed care insurance to allow people to have access to just basic health care. They need access to just needed care. They do not want to be treated one-size-fits-all.

Whether you are 7 or 70 in this country under HMOs, if you have got a certain diagnosis, you all get treated the same. That does not address individual needs. Doctors need the freedom to practice the art and the science that they have learned and that they are capable of doing. They do not have that right under our present system. They are pushed out on the line and given instructions by the HMOs, and yet the HMOs do not even want to be responsible for what they tell the physicians to do.

It is time for change. The American people are calling for it.

□ 1015

FREEDOM FOR EDUCATION

(Mr. FOSSELLA asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. FOSSELLA. Mr. Speaker, the essence of America, as we all know, is freedom, but somehow, that does not apply to education. Because the door slams shut on so many parents across this country when they want to have the freedom to choose the best education possible for their children.

Too often, too many Federal dollars are wasted here in Washington and not enough spent back home in Staten Island and across this country where the parents and the teachers, the local communities know better how to spend their funds.

Well, the Republican Party recently is embarking on a path towards freedom when it comes to education, and that is to allow States the opportunity and local communities to spend the money as they see fit. Can anyone in this country acknowledge that the folks here in Washington are in a better position to spend the money on education than back home where they are? Where the parents and teachers and administrators are? I think not.

Mr. Speaker, let us support freedom for education. Let us support the opportunity to send Federal money back home across America, and not be wasted here in Washington.

MANAGED CARE REFORM

(Mr. GREEN of Texas asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. GREEN of Texas. Mr. Speaker, the gentleman from Colorado that said he would bury us as Democrats, I guess going on their experience, they buried

managed care reform for 2 years, so they have that kind of experience.

Let me talk this morning about some ads that are in the Washington publications that talk about how the Dingell bill will be more expensive. Well, let me give my colleagues the Texas experience. We have had managed care reform in Texas for 2 years and the reason it is going to be more expensive is that they are going to have to start paying claims. They have lost half of the appeals process, so I would much rather have better than a flip-of-the-coin odds if I am going to managed care for health care.

Mr. Speaker, a 500 percentage may be great if one is a baseball player who will be making \$10 million, but when one is deciding whether one is going to have adequate health care, I would rather have a better percentage than a flip of the coin. They are actually going to have to pay those claims.

We need a real patients' bill of rights that has everything in it: accountability, access to specialists, a real appeals process, and no gag rules and medical necessity. That is why I do not think they are going to have the experience in burying this bill any more.

PHARMACEUTICAL BENEFITS FOR MEDICARE PATIENTS

(Mr. COOKSEY asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. COOKSEY. Mr. Speaker, I am a physician. Thirty years ago when I finished medical school, most of the patient's care was in-patient, and most of the pharmaceutical benefit was in-patient. Today, 25 percent of the cost of health care for Medicare patients is the pharmaceutical benefit. This is because most of health care for seniors and for everyone else is carried out on an out-patient basis today.

I feel that Medicare patients need some help with their pharmaceutical benefits. The truth is, two-thirds of Medicare patients already have a benefit. This two-thirds of the Medicare population does not need a pharmaceutical benefit. That leaves one-third who, in many cases, have high expenses for their pharmaceutical costs and desperately need some help with their Medicare benefits.

Medicare needs an integrated system with Medicare that will pay for these benefits. We have the best pharmaceutical industry in the world. We do not need to put them under the bureaucracy.

Mr. Speaker, this Republican supports a Medicare benefit for pharmaceuticals.

IMPROVING AMERICANS' ACCESS TO HEALTH CARE

(Ms. WOOLSEY asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Ms. WOOLSEY. Mr. Speaker, first it was campaign finance reform, then it was gun safety and school violence, now it is health care reform. There is an unfortunate pattern taking place here with the Republican leadership. On issue after issue, issues that are important to the people, the Republican leadership uses its power to stomp out real discussion.

Fortunately, we have an alternative, and that is the discharge petition, and we are signing it here today. Democrats have been waiting for 2 years to pass the Patients' Bill of Rights, and today we step forward to improve Americans' access to health care. Let us not be fooled by breaking last year's sham bill into eight pieces. The Republican leadership wants health care reform to be in small pieces. This will not sell. The American Medical Association says that the Republican package of bills falls short of the mark and it does not solve any of the problems of doctors and patients.

It is time to put doctors and their patients back in charge of health care reform.

FREE SOCIAL SECURITY LOCKBOX LEGISLATION

(Mr. HERGER asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. HERGER. Mr. Speaker, today is day number 63 of the latest hostage crisis. It is a hostage crisis that is not getting much attention in the mainstream media, but it has grave implications for current and future retirees nonetheless.

Since April 21 of this year, Democrats in the other body have blocked a Herger lockbox proposal, refusing to allow it to even come to a vote.

What is being held hostage is legislation to create a Social Security lockbox; in other words, legislation to create a safe deposit box that would put an end to the time-honored practice in Washington of raiding the Social Security Trust Fund whenever politicians want to expand government.

Republicans in the House of Representatives have passed Social Security lockbox legislation. We want to protect the Social Security Trust Fund from further raids. The other side is adamantly against it. Once we get into the habit of raiding a cookie jar, it is awfully tough to quit. It is time to end the hostage crisis and free the Social Security lockbox and protect seniors from more raids on the Social Security Trust Fund.

FEDERAL RESERVE SHOULD NOT RAISE INTEREST RATES

(Mr. HINCHEY asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. HINCHEY. Mr. Speaker, last week, the Chairman of the Federal Reserve Board appearing before the Joint

Economic Committee hinted broadly that the Federal Reserve is about to raise short-term interest rates. It would be a serious mistake for them to do so.

When asked why it was necessary to raise interest rates at this time, the Federal Reserve Chairman was at a loss to give a good reason. The only reason he could point to was that unemployment was now at about 4 percent, and they felt that that was too low.

To raise interest rates now would choke off the kind of economic progress that we have been enjoying for the last several years; and, it would create a situation whereby people who are just now beginning to benefit from this economic circumstance would be deprived of the ability to do so.

Wages and benefits of the average working people are now just beginning to go up over the course of the last couple of years. The Federal Reserve would cut that off. People who have not been able to find a job up until now are working. The Federal Reserve would cut that off.

It is a mistake to raise short-term interest rates, and we need to make it clear to the Federal Reserve that they ought not do so.

NATIONAL IDENTIFICATION CARD BAD IDEA FOR AMERICA

(Mr. PAUL asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. PAUL. Mr. Speaker, the American people strongly oppose the instituting of a national identification card. The authority was given for a national I.D. card in 1996. I have been working very hard to try to repeal this authority.

Today, we would have had an opportunity under the transportation bill to repeal this authority and to prevent a national I.D. card from coming into existence.

Unfortunately, that will not be permitted, due to the rule that is coming up for the transportation bill. I think this is a serious mistake. It is not just 30 or 40 or 50 percent of the American people who reject a national I.D., but almost all Americans reject this idea. I find it a shame that we are not able to vote on the repeal authority.

It was never intended that the Social Security number would be the universal, national identifier. It is given to a child at birth and one cannot even be buried without it. So the national I.D. card, when instituted, will be used for everything: To get on an airplane, to get a job, open up a bank account; whatever we want to do, we will have to show our papers.

This is un-American. It is something that we should not be doing, and unfortunately, we will not get to vote on it today.

DISCHARGE PETITION FOR HEALTH CARE REFORM

(Mr. DINGELL asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. DINGELL. Mr. Speaker, I have introduced a discharge petition today, number 3. I am urging all of my colleagues to join in signing it on both sides of the aisle.

The discharge petition provides for essentially an open rule. It allows full opportunity for open debate, and it allows full opportunity for amendment. It permits the minority to do what they feel is necessary, but it also assures that my colleagues on the Majority side will have full opportunity to participate.

There is no funny rule here, no cooking of the process. It is a full, open and fair process, both with regard to the amendment process and with regard to the actual handling of time and other parts of the legislation.

I urge all of my colleagues on both sides to join in signing this discharge petition on the patients' bill of rights. It is almost the first of July. The important part of the session is almost behind us, and all that we really are going to have time on from now on is to address budget appropriation and spending matters.

Mr. Speaker, I urge my colleagues to do something that the American people want. Sign the discharge petition and support the patients' bill of rights.

PUTTING POLITICS BEFORE OUR CHILDREN

(Mr. KINGSTON asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. KINGSTON. Mr. Speaker, as a father of four, I was very disappointed in the White House's behavior last week and many of the Democrat leadership Members in the House. We had a gun control debate. We had a good debate on juvenile justice, and we agreed, ultimately, on four out of five key issues. Included in that was closing the loophole for gun shows, stricter enforcement, stricter penalties that involved guns, trigger locks, and yet, because it was not exactly what the White House and the Democrat leadership wanted, they put politics over children and torpedoed the bill, killed it, voted it down, and now we have nothing.

In the political body, something is always better than nothing if we want to advance the cause, but it is just obvious that politics count more than children's safety. As a father, I take off my Republican hat and I say, I regret it as a parent.

Something is going on out there with our children. We need to look at all aspects of the pop culture. Is it the violent video games? Is it the fact that the average TV-viewing child has seen 16,000 murders on TV by the time he is

18 years old? Is it a problem in our schools that maybe our classrooms are too large? We should look at all of those things. I am sorry that the White House put politics over children.

SUPPORT THE PATIENTS' BILL OF RIGHTS

(Ms. DELAURO asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Ms. DELAURO. Mr. Speaker, for the past 2 years, the American public has been very clear in its desire for managed care reform. It has sent the same consistent message time and time again that medical decisions should be made by doctors and patients and not by insurance company bureaucrats.

Yet, the Republican leadership foiled meaningful HMO reform in the last Congress, and they are stalling as we speak. Today, congressional Democrats are signing a discharge petition calling for real managed care reform to be brought to the House floor immediately, because the Republican leadership will not bring that bill to the floor of the House.

This petition calls for a very, very simple set of comments: the ability to choose one's own doctor, an easy thing to grasp on to, guaranteed access to emergency rooms, guaranteed access to specialty care. Freedom from gag rules to prevent doctors from offering care, and the ability to hold HMOs accountable.

Mr. Speaker, I urge my colleagues to sign on to the discharge petition. The families of this country should be able to make their medical decisions free from the heavy hand of HMO accountants. Let us sign our names today and support a real patients' bill of rights.

SUPPORT MANAGED CARE REFORM

(Mrs. JONES of Ohio asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Mrs. JONES of Ohio. Mr. Speaker, last week, our children and families were denied protection from guns. This week, and for 2 years, we have been denied protection from managed care. We have been denied a patients' bill of rights.

I promised the people of the 11th Congressional District of Ohio that when I got to Congress, I would work for a patients' bill of rights and campaign finance reform.

□ 1030

I am chagrined, however, that I have not had the opportunity to debate these two issues. This is the second discharge petition I have had to sign. Over 122 million Americans are not insured with enforceable patient protections without a Federal Patients' Bill of Rights. Over 5,960,000 persons in Ohio alone are denied that protection.